Austin Center for Events

Thank you for choosing Austin, TX to host your event.

Things you should know:

An application must be completed, signed and submitted to the Austin Center for Events (ACE) to process any required permits and applicable fees. All requested information in this application is in the interest of public safety and is for internal staff use only. Additional information may be requested.

ACE has the right to approve or deny any application.

Please read through these documents thoroughly. Deadlines, requirements and related applications may vary by tier level"hyperlink" or event plan. ACE is here to guide you through this process.

*Applicant is responsible for any fees associated with this application. Applicant must be the signer of this application.

APPLICATION REQUIREMENTS

The following are requirements for consideration of a Special Events Permit:

Safety/Security Plan, Waste/Recycling Plan, Parking plan (where applicable), adequate toilet facilities, outreach to affected Neighborhood groups. Applications will not be considered complete without the following documents, theese are **required to schedule a meeting** with the Austin Center for Events review committee. Incomplete applications will not be accepted and may be subject to denial based on submissions deadlines.

Completed Application	p. 1-"10"
Scaled Site Plan	
Route/Event Map	

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I. GENERAL EVENT INFORMATION

Austin Center for Events Application505 Barton Springs Road, Suite 1070 Austin, TX 78704 512.974-"..."

This application must be *completed*, signed and submitted to the Austin Center for Events (ACE) to process any required permits and applicable fees.

Official Event Title:								
Venue Na If applicable			Site plan and	Event Address: Site plan and event map required for this application to be considered complete.				
II. PF	ODUCTION	N INFORM	ATION					
	swer all that a				Expected Daily Attendance		Expected Talent For safety planning,	
					participants	volunteers/ staff	internal staff use only.	
Load-in	Day:	Date(s):	Start Time:	End Time:				
Example	Monday	dd/mm/yyyy	12:00 AM	11:59 PM				
Inspection	n scheduling w	ill vary depend	AN ON-SITE IN ding on required (4:00pm, Monday	City Department	availability.	Inspections o	conducted between	
Day 1	Day:	Date:Click	Start Time:	End Time:				
Day 1		here to						
		enter a						
		date.	a	- 1-				
Day 2	Day:	Date:	Start Time:	End Time:				
Day 3	Day:	Date:	Start Time:	End Time:				
Day 4	Day:	Date:	Start Time:	End Time:				
Day 5	Day:	Date:	Start Time:	End Time:				
Load-out	Day:	Date(s):	Start Time:	End Time:	Total Att	endance		
If more than	5 days are bein	g requested, ple	ease indicated here	and attach a dupli	cate sheet.			
III. APPLICANT INFORMATION								
	g Organizatio			Producina	Organizatio	n:		
Mailing Ad					Mailing Address:			
Applicant Name: Applicant is responsible for any fees associated with this					Applicant Phone:			
application. Applicant must be the signer of this application.				Applicant I	Applicant Email:			
Primary On-Site Contact: *required *				Primary O	Primary On-Site Contact Phone:			
Secondary On-Site Contact:					Secondary On-Site Contact Phone:			
*On-Si	*On-Site contact listed must be available to meet on-site during the entire event duration, including load-in and load-out.							

IV. E	VENT	DET/	AILS						
EVENT TYPE: /	Please (check all	that a	pply.					
☐ PARADE/PROCESSION		CONCERT/PREFORMING ART		T/PREFORMING	RUN/WALK	☐ PROMO	TIONAL/ADVERTISING		
☐ PROTEST/RALL	_Y		□во	DATING	G/ROWING	□ SWIM	□ OTHER(S):	
☐ FESTIVAL/FAIR	R/BLOC	CK PART	Y□ TF	RIATHLO	ON/MARATHON	☐ BICYCLE			
Is this event?						How will this event	t be advertis	sed?	
_		Public	3			☐ TV/Radio/Print ☐ Billboards			
☐ Annual		Privat	:e			☐ Social Media/Web ☐ Posters			
☐ Recurring		Admis	ssion F			☐ Advanced Ticket	Sales		
		Admis	,510111	сс		Other(s):			
Previous Name(s)	:			Numb	er of	Additional comments:			
				Years Ex: 10	: th annual				
Any changes from	previ	ous yea	rs?						
LOCATION: No		1-411			:t	f			
				t to an		f your event may apply.			
Inside an exist structure	ting [_ Vacar	acant Lot		Right of Way	Cross or railroad	come within 200 ft of		
		_ Parkir			See ROW Section	on	Tamoda tracks		
	_								
authorized use of a building		□ Privat	Private Property Public Property Public Property			serve on-street			
		_ Public				aces			
		State Property					Ex: Will your closing any b	r event require	
E 5	vonto	hold on	tho C	ity of A	uctin parkland	require additional pern	,	, 	
							Procedures for City parkland.		
								application	
BUILDINGS/EG	OLITE	MENT.					EVENT		
Please check the box				y part o	f your event may	apply.		Y/MEDICAL:	
		<u> </u>			Т		Please check	all that apply.	
Tent or tempor structure(s)	rary		lectrica	al, plun installi	nbing or ation(s)	Generator/fuel type	\square Austin Police Department		
Stage(s)/Scaffe	oldina				. ,	☐ Propane	☐ Private 9	Security Company:	
☐ Fencing	· · · · · · · ·			cal flam nance/c	ne open flame(s)	·	Name/Co	ntact/Phone	
_	٥٣					Fireworks/ pyrotechnics	Austin-Travis County Emergence		
☐ Signage/Banne			Inflatable's/Bouncy Toys			□ Other:	Modical Continue		
Amplified Soun (inside or out)		□ (i	ther s	ound e	quipment oull horn)	E other.	☐ Private N	Medical Provider:	
, (4.11011			, a		Name/Contact/Phone				
SITE PLAN/EVENT MAP: Detailed, scaled site plans or event maps are required for every event. These should									
include as applicable: labeled surrounding streets, north arrow, lot dimensions, fire lanes (15' lanes, 25' turn radius), fencing/barriers, booths, canopies/tents, cooking areas, generators, vehicles, beer									
• • •			-	-	•	, cooking areas, gen osters, etc. Examples (
<hyperlink></hyperlink>	unu u) i i i	Chician	ccs, cxits, uuiiip	occio, ecc. Examples	can be round	nore:	

V. AMPLIFIED SOUND (21-30 day deadline)							
Rules and h	elpful info						
Day 1	Day: Monday	Date: dd/mm/yyyy	Start Time: 12:00 AM	End Time: 11:59 PM	Decibel Limit:		
Day 2	Day:	Date:	Start Time:	End Time:			
Day 3	Day:	Date:	Start Time:	End Time:			
Day 4	Day:	Date:	Start Time:	End Time:			

VI. EVENTS IN THE							
The public Right of Way (ROW) is typically defined as the roadway plus 10' behind the curb. This definition of the City Right of Way may vary depending on the physical conditions at any given location. If your event needs to utilize space in the street outside your event area for staging of vehicles, material, people or equipment; you may be impacting the ROW. Transportation Special Events.							
Please answer all that apply.	rtation Special Eve	1165.					
ROWMAN.	nple ROWMAN numbe	er	PARTICIPANT INFORMATION				
Have you submitted a Street	☐ Yes		TYPE	Children ages	NUMBER		
Closure Information Form? <hyperlink example="" form="" of=""></hyperlink>	□ No		Adults				
Who will prepare a Traffic Control Plan (TCP) for the event?	☐ City of Austi	n	Children				
< hyperlink example of a TCP>	☐ Other Registered PE		Animals/ Pets				
			TOTAL P	ARTICIPANTS:			
IMPORTANT EVENT <i>Please answer all that</i>			Assembly time for onsite participants:				
Registration/Check-in time: 11:59 PM		Staging location:					
Walk/Run start time (1 st wave):	(2 nd wave):	De-staging location:					
Will any of the following street(s)/brid			Number of floats:				
☐ 11th Street ☐ Drake B	ridge (S 1st Street	BAI	RRICADE COMPAN	Y			
☐ Ann Richards/ Congress Ave Bridge ☐ Guadalu		Company Name:					
Cesar Chavez St Lamar B	lvd (btwn 30th		Primary Contact:				
	White Blvd)		Mobile Number:				
Congress Avenue Rainey S							
Will the event enclose a geographic area? Additional comments: ☐ Yes ☐ No							
What dates and times are you requesting street closures?							
Is this a City or State of Texas Le	gal Holiday?	ate:	End Date:	dd/mm/r			
☐ Yes ☐ No		Start Ti	dd/mm/yyyy me'	End Time:	dd/mm/yyyy		
	12:00 AM	Liid fillie.	11:59 PM				
Any event in the ROW, will require to a ROWMAN application, a Street Closure Information Form and have a Traffic Control Plan made or provide sealed plan from a Registered PE.							

VII. EVE	NT SECU	JRITY					
Rules and helpful in	nfo						
Will you be using A	ustin Poli	ce Department (APD) or	a private security a	agency?			
☐ APD	☐ Priva	te 🔲 Both					
Private Security Pro	ovider Nar	me:	Contact Name:				
			Contact Phone:				
VIII. EVE	NT MED	ICAL					
Rules and helpful in							
		vis County Emergency N	Medical Services (AT	CEMS) or a priva	te provider?		
▼ ATCEMS	☐ Priva						
Private Medical Pro	vider Nan	ne:	Contact Name:				
			Contact Phone:				
IX. FOC	D/BEVE	RAGE					
	uired. <u>Hea</u>	or provide food vendors a <u>Ith and Human Services B</u>			lth & Human		
☐ Packaged food		☐ Packaged beverage	es	☐ Food vend	dors		
Prepared food (hot or cold)		☐ Open beverages Number of vendors:					
Temporary Food Event Permit Application							
A copy of the permit is required prior to the issuance of a Special Event permit.							
☐ Alcohol	Eve	Events that plan to serve alcohol are required to coordinate with the <u>Texas Alcoholic Beverage Commission (TABC)</u> . I have coordinated v			I have coordinated with TABC		
					17.150		
X. TRASH AND RECYCLING							
		wasteevents for more info					
Please indicate the number of each item needed for the event. *Trash and Recycling capacity must be equal **Composting is not a requirement but encouraged							
Number of receptac	cles/contair	ners to be used for	Number and size	e of dumpsters and e used at the event	l/or roll-offs		
TYPE	ridis offsice	NUMBER	TYPE	SIZE	NUMBER		
Trash*			Trash*				
Recycling*			Recycling*				
Compost**			Compost**				
DELIVERY OF DUMPSTERS AND/OR ROLL-OFFS			DUMPSTER/ROLL-OFF COMPANY				
DELIVERY DATE: dd/mm/yyyy	DELIVER 11:59 PM	RY TIME:	Company Name:				
REMOVAL DATE:	REMOVA	AL TIME:	Company Telephone	Number:			
	Identify o	n your site plan the location	on of all dumpsters and	d/or roll-offs.			

XI. ENVIRONMENTAL SUSTAINABILITY REQUIREMENTS						
Section #_ of the special events ordinance requires all Tier IV events have a Sustainable Event Plan in place to mitigate negative environmental impacts and improve sustainability outcomes. The Sustainable Event Plan should incorporate a reasonable and effective combination of strategies identified in the special events guidance document.						
Please attach a narrative detailing the strategies planned. The plan should include all sustainability and environmental impact mitigation activities, campaigns, promotions, and incentives associated with this event.						
XII. NOTIFICATIONS and COMMUNICATION						
Notifications to affected persons will be required for all special events. Delivery method will be determined by <event tier="">. Depending on the location or specifics of your event other local agencies may need to be involved for coordination efforts. Examples include but are not limited to the following; please check any you think may apply. ACE will be happy to assist you with these.</event>						
Austin Convention						
State Parking Facilities State Preservation Texas Alcoholic Beverage Commission Texas Department of Public Safety: Capitol						
Texas Department University of Texas of Transportation at Austin Other:						
XIII. OTHER INFORMATION						
The City also requires the following information be supplied for the event to qualify for approval. Some may be dependent on <tier level="">.</tier>						
 EVENT SAFETY PLAN EVENT RESTROOM FACILITIES PLAN EVENT TRASH, RECYCLING AND/OR COMPOSTING PLAN EVENT COMMUNICATION PLAN WITH NEIGHBORHOOD GROUPS EVENT INSURANCE 						
The City of Austin strongly encourages promoting and using alternative transportation options to event participants and planners. For example: carpooling, biking or using CapMetro transportation options.						
Please attach any additional information to the application.						
XIV. INSURANCE						

Proof of insurance must be provided to the Special Event no later than "____" (#) days prior to the start of the event. A Special Event Permit will not be issued until all insurance requirements have been received, verified and approved.

XV. SIGNATURE						
"I, the applicant signer, affirm that I am authorized to represent this application. As a representative of the Event Organizer, I a individual departments associated with this event as they are I is the responsibility of the applicant to notify all affected depart application must be submitted in writing and approved by all in special event permits."	agree to pay the full amounts that will be specified by aid out in the fee schedule portion of this application. It the the second seco					
The undersigned hereby declares that the information provided in this application is true and that I have read any related ordinances and rules and understand the conditions of this application as set forth therein.						
APPLICANT SIGNATURE:	PLICANT PRINTED NAME:					
DATE:						
By checking this box as an electronic signature, I agree to all the terms and conditions that may apply to the Special Event permitting process and agree that all information contained in this application is tru and correct to my knowledge. All documents received by the Special Event Committee are public documents and subject to the public records requests in reference to						
Austin Center for Events staff use only The following documents have been received and are complete: Completed Application	Application submission date: Received by					
☐ Scaled Site Plan/ Event Route or Map	Name:					
☐Event Insurance (pending approval)	Department:					